\vdash			Ellective D	ecember 8,	RMINATION I	KECORD	ł	cation or Dock	
		CLAIM	S AS FILE	D - PART I		SMALL EN		·	
U.	S. NATIONA	I STAGE FEE	(Co	(Column 1) (Column 2)		TYPE		OTH OR SMAL	ER THAN L ENTIT
U.S. NATIONAL STAGE FEES BASIC FEE			9			RATE	FEE	RATE	FE
EXAMINATION FEE						BASIC FEE		OR BASIC FEE	2/1
* 1 advanta ()						EXAM. FEE		EXAM: FEE	
SEARCH FEE						SEARCH FEE	1	SEARCH FE	<u> //w</u>
EE FOR EXTRA SPEC, PGS.			n	ninus 100 =	/ 50 =	X \$ 125 =		.	1.11
OTAL CHARGEABLE CLAIMS			24	minus 20 = .		X \$ 25 =		X \$ 250	
NDEPENDENT CLAIMS				minus 3 = *		X \$ 100 =		OR X \$ 50 =	
ULTIPLE DEPENDENT CLAIM PRESENT					П	+ \$ 180 =		OR X \$ 200	
If the difference in column 1 is less than				ero, enter "0" ir	n column 2	TOTAL		OR +\$360:	
	Total	CLAIMS REMAINING AFTER AMENDMENT		(Column 2 HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT	SMALL EN	ADDI- TIONAL FEE	R SMALL RATE	ADDI TIONA FEE
	Independent		Minus	**	=	X \$ 25 =	OI	R X \$ 50 =	1
AMENOMENI		The second second	Minus	***	=	X \$ 100 =	OI.	R X \$ 200 =	
	i mor Pres	SENTATION OF I	MULTIPLE DEF	PENDENT CLAI	м 🗌	+ \$ 180 =		+ \$ 360 =	
-			· .*			TOTAL ADDIT. FFF		TOTAL ADDIT.	
Ī	· · · · · · · · · · · · · · · · · · ·	(Column 1) CLAIMS		(Column 2)	(Column 3)			,	
-	:	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE T	ADDI- IONAL FEE	RATE	ADDI- TIONAL
١	otal	*	Minus	**	=	X \$ 25 =		V 0.50	FEE
-	ndependent	*	Minus	***	=	X \$ 100 =	OR OR		
l				<u> </u>	_1 .	1 V # 100 = 1	OR	X \$ 200 =	
l	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIM		+ \$ 180 =	OR		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 3MPTO-875 (Rev. 02/2005)

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